DEPARTMENT OF THE NAVY



OFFICE OF THE SECRETARY WASHINGTON, D.C. 20350-1000

SECNAVINST 12351.5E ASN(M&RA) 4 March 1993

SECNAV INSTRUCTION 12351.5E

From: Secretary of the Navy

Subj: APPROVAL AND NOTIFICATION OF CIVILIAN REDUCTION-IN-FORCE,

TRANSFER OF FUNCTION, AND FURLOUGH ACTIONS

Ref:

(a) SECNAVINST 5700.9D (NOTAL)

(b) FPM Supplement 351-1

(c) CPI 351

Encl: (1) Fact and Justification Sheet

1. <u>Purpose</u>. To revise authority and procedures for the approval and implementation of reduction-in-force (RIF), transfer of function, and furlough actions. This instruction is a complete revision and should be read in its entirety.

Cancellation. SECNAVINST 12351.5D.

3. <u>Coverage</u>

- a. <u>Scope</u>. Applies to all RIF, transfer of function and furlough actions affecting civilian employees resulting from workforce and workload adjustments, resource limitations, base closures, contracting-out determinations, skills imbalances, and similar causes. For these actions, the policies and procedures prescribed here for clearance and approval will take precedence over those contained in paragraph 6 of reference (a).
- b. <u>Exclusions</u>. This instruction excludes Nonappropriated Fund positions, Foreign National positions, and displacement actions caused by the exercise of statutory return rights (see Civilian Personnel Instruction 352).
- 4. <u>Policy</u>. Department of the Navy policy is to accomplish required civilian personnel reductions through attrition whenever possible. The involuntary separation or furlough of civilian employees will occur only when activity heads are convinced that other prudent actions (such as hiring freezes and limitations on the use of overtime) cannot accomplish the required results.



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SECNAVINST 12351.5E 4 MAR 1993

- a. The use of furloughs is not appropriate in the case of long-term workload or funding reductions. When funding for personnel compensation will not be available in future years, RIF procedures should be employed. If financing or manage to payroll authority is not available to implement a RIF, this shortfall should be addressed via the chain of command following normal budgetary procedures.
- b. Where involuntary separations or furloughs are clearly unavoidable, they will, upon clearance and approval, be carried out following the provisions of references (b) and (c). Consistent with the Human Goals Charter for the Department of Defense, prior to implementation of restructuring and RIFs, impact analyses are to be performed to assess and guard against any disproportionate impact on Equal Employment Opportunity (EEO) groups.
- 5. <u>Delegation</u>. The authority of the Secretary of the Navy to approve RIFs, transfers of functions, and furloughs is delegated to the following:
- a. For actions involving the involuntary separation, transfer, or furlough (for more than 30 consecutive days or more than 22 work days if done on a noncontinuous basis) of 50 or more civilian employees, or when these actions would generate significant Congressional interest regardless of numbers affected: the Assistant Secretary of the Navy (Manpower and Reserve Affairs (ASN(M&RA)). Echelon 1 and 2 commands are delegated authority to involuntarily separate on-call employees.
- b. For actions other than those covered in paragraph 5a, above: the Assistant for Administration, Office of the Under Secretary of the Navy (AA/USN); the Commandant of the Marine Corps (CMC), the Chief of Naval Research (CNR), the Chief of Naval Operations (NO9B), and the commanders of Echelon 2 commands under the Chief of Naval Operations.
- (1) Actions taken under this authority will be cumulative on a fiscal year basis for an individual activity. This authority may not be used once the aggregate number of employees involuntarily separated, furloughed, or transferred (through a transfer of function) at an individual activity exceeds 50 during a fiscal year.
- (2) Authority under paragraph 5b may be redelegated. For RIF actions taken under this authority, the following information will be provided to the Deputy Assistant Secretary of the Navy (Civilian Personnel Policy/Equal Employment Opporturity) when approval is granted.

SECNAVINST 12351.5E 4 MAR 1993

- (a) Name of Activity/Location
- (b) Total workforce
- (c) Number of RIF separations proposed
- (d) Projected effective date
- (e) Brief justification
- (f) Name and phone number of point of contact
- 6. <u>Procedure</u>. The following procedure will be used in processing requests for actions requiring ASN(M&RA) approval.
- a. The AA/USN, CMC, CNR, CNO (N09B), and the commanders of Echelon 2 commands will submit requests to the ASN(M&RA). Requests will contain all information required in enclosure (1).
- b. The ASN(M&RA) will coordinate all requests with the Assistant Secretary of the Navy (Research, Development and Acquisition), the Assistant Secretary of the Navy (Installations and Environment), Assistant Secretary of the Navy (Financial Management), and with the Chief of Naval Operations on Echelon 2 commands' requests.
- c. The ASN(M&RA) will render a decision on the requested action, normally within 10 work days.
- d. After approval, the ASN(M&RA) will ensure appropriate clearances and notifications are made.
- e. Upon notification by the ASN(MR&A), the Chief of Legislative Affairs will notify the Secretary of Defense and Congress, and have the Chief of Information announce the planned action as appropriate.
- 7. <u>Action</u>. Officials delegated approval authority will issue implementing instructions, as necessary, to ensure compliance with this instruction.
- 8. Report. Report control symbol SECNAV 12351-1 is assigned to the reporting requirement in paragraph 5b(2) and is approved for 3 years from the date of this instruction.

J. S. Kelso, II

Acting

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(See page 4)

SECNAVINST 12351.5E A MAR 1993

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SECNAVINST 12351.5B 4 MAR 1993

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FACT AND JUSTIFICATION SHEET FOR ACTIONS REQUIRING ASN(M&RA) APPROVAL

1.	Fact	Sheet	on	(name	and	location	of	the	acti	vity)	:

- 2. Background and mission:
- a. State approved activity mission. Include any significant information having a bearing on the request to include summary information on previous reductions—in—force, furloughs, or transfers of functions conducted during the current fiscal year.
 - b. Number of permanent onboard employees as of (date):
 - c. Number of temporary onboard employees as of (use same date as in 2b).
 - d. Number of vacancies authorized for recruitment as of (use same date as in 2b).
- 3. Approval of this action will result in (check appropriate block):
 - a. _____ Transfer of function to ____ (state location)

 b. ____ Reduction in force

 c. ____ Furlough for ____ (work/calendar)days
- 4. Proposed effective date of the action:
- 5. Reason for the action:
- 6. Funding impact (anticipated savings vs cost of proposed action):
 - a. Savings:
 - b. Costs: (e.g. severance pay, unemployment, relocation, etc.)

SECNAVINST 12351.5E

4 MAR 1993

- 7. Impact of the action on the civilian workforce:
 - a. Number of anticipated RIF separations:
 - b. Number of anticipated furloughs:
 - c. Number of anticipated transfers with function:
 - d. Estimated number of temporary employee terminations:
 - e. Estimated number of on-call employees released:
- f. Anticipated attrition for each of the following categories:
 - (1) Estimated number of retirees:
- (2) Estimated number of employees to transfer to other activities within the commuting area (in a transfer of function, do not include those employees who you anticipate will transfer with their function):
- (3) Estimated number of employees to transfer to other activities outside of the commuting area (in a transfer of function, do not include those employees who you anticipate will transfer with their function):
 - (4) Other:
- 8. Impact of the action on military personnel:
 - a. Number of officer end-strength reductions:
 - b. Number of enlisted end-strength reductions:
- 9. Impact of the action on civilian EEO:
- a. Total number permanent onboard (provide by the following categories):

Caucasian	Black M/F	Hispanic M/F	Other M/F	*Handicapped M/F
**M/F /	M/F /	/	/	/

^{*} If minority and handicapped, report in both categories

^{**} M: Male F: Female

4 MAR 1993

b.	Est:	imated	i total	numb	oer o	of p	erma	nent	on	boa	ard	adver	sely
affected	a by	RIF	(provide	by	cate	egor	ies	liste	ed i	n i	9a):		

Caucasian	Black	Hispanic	Other	Handicapped
M/F	M/F	M/F	M/F	M/F
1	/	/	/	/

c. Estimated total number of permanent on board affected by furlough or transfer of function (provide by categories listed in 9a):

Caucasian	Black	Hispanic	Other	Handicapped
M/F	M/F	M/F	M/F	M/F
, -	/	/	/	/

10. Economic impact on the activity:

- a. Number of RIF actions taken prior to this request this fiscal year:
- (1) Number of involuntary separations to date this fiscal year:
- (2) Number of employees adversely affected by RIF to date this fiscal year (do not include involuntary separations):
- b. Number of transfer of function actions taken prior to this request this fiscal year (provide information in following format; if more than one transfer of function, list each separately):

Function transferred:
Date transferred:
Location where transferred:
Number of employees affected:

c. Number of furlough actions taken prior to this request this fiscal year (provide information in following format):

Dates of furlough (from-through): Number of employees affected:

- 11. Provide the following when proposed action results from a Commercial Activities (CA) study:
 - a. Number of permanent onboard employees under CA study:
 - b. Number of temporary onboard employees under CA study:

SECNAVINST 12351.5E A MAR 1993

- c. Number of vacant positions under CA study:
- d. Statement of the impact on the military mission of the activity (this statement should be consistent with the CA Decision Summary Message):
- 12. Provide the following economic impact on the community if more than 75 employees will be affected by a conversion to a contract that resulted from a CA study:
 - a. Current status for entire community:

Location:
Population:
Employment:
Business volume:
Tax base:
Personal income:

b. Anticipated impact of proposed actions:

Location:
Population:
Employment:
Business volume:
Tax base:
Personal income:

- 13. Assistance to affected civilians (briefly describe efforts):
- 14. <u>Labor organizations affected (specify the organization; if none, so state)</u>:
- 15. Name and telephone number (commercial and autovon) of individual at this activity who can provide detailed additional information: